Survey on tfie T. B., Blindness and Cancer in the Country

1716. SHRI SUBAS MOHANTY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased TO State:

(a) whether Government have made a survey so as to know the number of patients suffering from deafness, blindness, T. B. and cancer in the country and if so,to what are the details in thi$_s$ regard and to what extent the existing medical facilities are adequate to treat the affacted patients;

(!b) whether it is a fact that the cost of medical care is beyond the reach of the poor in the villages; and

(c) if so, what steps are being taken in this regard?

THE MINISTER OF HUMAN RE-SOURCE DEVELOPMENT AND MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P. V. NA-RASIMHA RAO): (a) to (c) The findings of the surveys conducted by th$_e$ Indian Council ,of Medical Research, New Delhi in respect of deafness, blindness, T.B. and cancer are given below:—

DEAFNESS—The Indian Council of Medical Research conducted a survey on prevalence and aetiology of hearing impairment at 4 centres, Calcutta, Madras, New Delhi and Trivan-dum from 1977 to 80. The prevalence of hearing impairment was found to be 19.7 percent in the rural and urblan population. Chronic suppurative otitis media and presbyacusis were the major causes of hearing impairment.

BLINDNESS—The ICMR had conducted a sample survey *&n* 1971-73 in different parts of the country to find out the number of blind persons in the country taking visual equity less than 6160 with both eyes open as the criteria for blindness (i.e. inability to count at.

T.B. For providing free diagnostic and treatment facilities to . poor people in villages, District T.B. programme is being integrated with the General Health Services so that the facilities are available in tho nearest health institutions of the rural population.

CANCER—Government have arranged to provide fre$_e$ treatment to the poor people in the villages through the Government recognised Hospitals and Regional Cancer Research & Treatment Centres.

Drug, policy-facade of Consultation

1717. SHRIMATI RATAN KUMA-I RI: Will the Minister of HEALTH j AND FAMILY WELFARE be pleased to state:

(a) whether his attention has been drawn to the editorial appeared in, the issue of 4th April, 1987 of Economic and Political Review under the heading of "Drug Policy-Facade of Consultation";

Cb) if so, whether it is a fact that category I drug list based on National Health Programme do not include number of drugs such as vaccines for immunisation programme, drugs for maternal and child health programme, oral rehydratic salts etc.;

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(c) if so, who identified the list and on what basis;

(d) whether it is a fact that public announcement was made in December, 1986 that category I list of drugs will be comprised of drugs re-

| quired for the control of diseases i under National Health Programme;

(e)' whether immunisation, maternal and child health programme, mental health programme are not covered under National Programme of his Ministry; and

(f) if so, how these important I vaccines and drugs can be omitted? l

THE MINISTER OF HUMAN RE-' SOURCE DEVELOPMENT AND